

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 141
Registered No. _____

1. PLACE OF BIRTH

County Sila State _____
District or Township _____ or Village _____
City Winkelman No. _____ St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Ramon Bracamonte (If child is not yet named, make supplemental report, as directed.)

3. Sex of Child Male To be answered ONLY in event of plural births. 4. Twin, triplet or other _____ 5. No., in order of birth _____ 6. Legitimate? Yes 7. Date May 13 1926
Month Day Year

8. FATHER
Full name Ramon Bracamonte

9. Residence (Usual place of abode) Winkelman
If non-resident, give place and state.

10. Color or race Mexican 11. Age at last birthday 27 (Years)

12. Birthplace (city or place) Phoenix
(State or country) Ariz.

13. Occupation laborer
Nature of Industry

14. MOTHER
Full maiden name Chonita Rivera

15. Residence (Usual place of abode) Winkelman
If non-resident, give place and state.

16. Color or race Mexican 17. Age at last birthday 26 (Years)

18. Birthplace (city or place) Phoenix
(State or country) Ariz.

19. Occupation House Wife
Nature of Industry

20. Number of children of this mother 1 (Taken as of time of birth of child herein certified and including this child.) (a) Born alive and now living 1 (b) Born alive but now dead 0 (c) Stillborn 0 21. Were precautions taken against ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was _____ at 8 A. m. on the date above stated
(Born alive or stillborn)

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature Charles H. Huth (Physician or midwife)

Given name added from a supplemental report _____ Address Hayden Ariz.

Month, day, year _____ Filed June 9 1926 Registrar P. H. Huth

Registrar

929-513-371

N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.